

Report of Contributions and Expenditures For Legislative Candidates and Officeholders

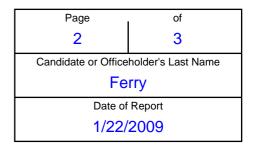
	(Utah Code Section 20	DA-11)		
Name of Candidate or Officeholder			Phone Number	
Ben C. Ferry			(435)744-29	97
Street Address Suite/	Apartment/PO Box:	City	State Zip	
905 North 6800 West		Corinne	UT 843	307
Office Distric	ct Number	County	Political P	arty
Utah House of Representatives	2	Multi-County	Republic	an
	Type of Repo (Check the appropria]
INTERIM REPORTS:		FINAL REPORT:		
Seven days preceding Party Convention (Required by all candidates) Seven days preceding Primary Election (Required by all candidates) (Required by all candidates) August 31st Final Report (Required by all candi officeholders as soon campaign accounts			soon as they close	
(Required by all candidates) Seven days preceding a Gen (Required by all candidates) YEAR-END REPORT January 10th of every year	eral Election	Yes Is this rep No	ort an amendment?	
	Report Verification	tion]
	Ben C. Ferry	,		
Ι,	Name of Candidate			
affirm that this R true, accurate	Name of Candidate affirm that this Report of Contributions and Expenditures is true, accurate and correct to the best of my knowledge.			
	Ben C. Ferry			
	Signature of Candi	idate		
	1/22/2009			
	Date		_	
To File this Form		For Office	Use Only	
Mail or deliver to Lieutenant Governor's Office		X Entered		

Mail or deliver to Lieutenant Governor's Office Utah State Capitol, Suite 220 Salt Lake City, UT 84114-2325 (801) 538 - 1133

For More Information

Contact the Lieutenant Governor's Office (801) 538 - 1041 1-800-995-VOTE(8683) elections@utah.gov

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Summary Page

(Complete this page after filling out all Schedule A and Schedule B forms)

REPORTING PERIOD DETAILS

Report: Year End

Beginning Date: 1/1/2007 Ending Date: 12/31/2007 Due Date: 1/5/2008

BALANCE SUMMARY			YEAR TO DATE
1	Balance at Beginning of Reporting Period (Refer to line 5 of last report)	\$0.00	
2	Total Contributions Received (See Schedule A)	\$0.00	\$0.00
3	Subtotal (Add lines 1 & 2)	\$0.00	
4	Total Expenditures Made (See Schedule B)	\$0.00	\$0.00
5	Ending Balance (Subtract Line 3 from Line 4)	\$0.00	